

State of Rhode Island and Providence Plantations
Department of Labor & Training
Workers' Compensation Self-Insurance Unit
P.O. Box 20190
Cranston, RI 02920-0942

Telephone: (401) 462-8100 Fax: (401) 462-8095

SELF-INSURANCE AGREEMENT

As a requirement by the Director, this Self-Insurance Agreement must be completed and returned as soon as possible.

In addition, Trust and Escrow Agreements may be required at any time at the option of the Director.

SELF-INSURANCE AGREEMENT

This Agreement ("Agreement") dat	ed as of by and between
	a corporation (incorporated in), and if applicable as
a parent company,	, incorporated in,
and the Department of Labor & Tr	aining of the State of Rhode Island, or the successor,
department, agency or office to the re-	esponsibilities of such Department (the "Department").
	WITNESSETH
WHEREAS,	is an employer subject to the
provisions of Chapter 29 through 3	8, inclusive, of Title 28 of the Rhode Island General
Laws, as amended, known as the Wor	rker's Compensation Act ("the Act"); and
WHEREAS,	desires to self-insure for all or part of
its' liability under the Act pursuant to	Section 28-36-1 of the Act; and
WHEREAS, the Department is willing	ng to allow
to self-insure for all or part of its' lia	bility under the Act, subject to the following terms and
conditions.	
NOW, THEREFORE, for good and	d valuable consideration, the receipt and sufficiency of
which are hereby acknowledged, the	parties agree as follows:
Certificate. Provided	has satisfied and/or
complied with all of the terms and	conditions contained in this Agreement, pursuant to
Section 28-36-2 or the Act, the Depart	rtment shall issue to
a certificate of self-insurance indica	ting compliance
with Section 28-36-1 of the Act (th	e "Certificate"). The Certificate shall remain in force
from,	at 12:01 a.m. through and including
	at 12:00 a.m., unless revoked pursuant to the
provisions of the Act or pursuant to	Section 9 hereof.
2. <u>Employee Information</u> . T	he Certificate is issued to:
- · · · · ·	ct to the Act as of the date hereof which is agreed to
include	and for any employees that may be hired during the
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term the Certificate is in effect, as long as	shall not be in
default of its' obligations under this agreement.	
3. Loss Information .	shall at its' sole cost and
expense, cause and occupational safety and loss 1	prevention analysis, including
recommendations, to be performed by a reputable firm	_
Department, in its' sole discretion; should the Department	at any time during the course of
self-insurance certification feel that such a need has arisen	in the interest of protection of
Rhode Island employees in the program.	
4. <u>Audit</u> at	its' sole cost and expense, shall
submit to the Department an independent underwriting au-	dit and analysis in such form as
the Department may require to include a breakdown of th	e number of employees in each
applicable classification code and the payroll for each class	ification code. The request for
audit and analysis shall have a stated reporting date.	
5. <u>Bond or Security</u> . (a) As additional security for the 1	payment and performance of the
obligations of under	er the Act, contemporaneously
with the execution of this Agreement,	
the Department with a bond or security in the amount of _	Dollars
(\$). Said bond (i) shall be issued by an	insurance company qualified to
transact business and issue such bonds in the State of Rhode	Island under all applicable laws,
(ii) shall have a rating of A or better by each of Standard &	Poor's, Moody's and Best's and
(iii) shall contain such terms and conditions as the Direction	ector shall deem necessary and
appropriate in his discretion. And/or	. ,
pledged to th	
Rhode Island employees of	
otherwise satisfy all requirements of the bond described in So	•
6. Representations and Warranties.	
and warrant which representations and warranties shall be c	_
and shall be deemed the joint and several representatives o	f
as follows:	

(a)(i) is a duly organized corporation, validly
existing and in good standing under the laws of the State of (ii) has
the corporate power and authority to own its' properties and to carry on business as now
being conducted and is qualified to do business in every jurisdiction where such qualification
is necessary, including without limitation, the State of Rhode Island and (iii) has the
corporate power to execute, deliver, and perform its' obligations under this Agreement, and
any and all other Agreements, documents and instruments executed in connection herewith
(collectively, "such Agreements").
(b) The execution and delivery of, and performance by
of obligations under this Agreement and such
Agreements have been duly authorized by all requisite corporate action on the part of
, do not require the consent of any third party and wil
not violate any provisions of law, any order or any court or other agency or government, the
corporate charter or by-laws of, or any indenture
agreement or other instrument to which, is a party, or
by which it may be bound; or be in conflict with, result in a breach of, or constitute (with
due notice or lapse of time or both) a default under, or except as may be provided by the
Agreement, result in the creation or imposition of any lien, charge or encumbrance of any
nature whatsoever upon any of the property or assets of
pursuant to any such indenture, agreement or instrument. The execution and delivery of this
Agreement and such Agreements will constitute the valid and binding obligations of
, enforceable in accordance with their respective terms.
(c) is not a party to any agreement or instrument
or subject to any charter or other corporate restriction adversely affecting its' business
properties or assets, operations or conditions, financial or otherwise
has no knowledge of any default and is not in
material default in the performance, observance or fulfillment of any of the obligations
covenants or conditions contained in any agreement or instrument to which it is a party.
(d) No statement of fact made by or on behalf of
in this Agreement or in any application, financial statement, certificate, report or any other
documentation furnished to the Department, contains any untrue statement of a material
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hereir	n not	misleading.	There	is	no	fact	preser	ntly	known	to
			whic	h has 1	not bee	en dise	closed to	the D)epartm	ent in
this	Agreemen	nt or otherwise	which	materia	ally af	fects	adversel	y nor	as f	ar as
			can	forese	e, will	l mat	erially a	ffect a	adversel	y its'
prope	erty, busine	ess, operations or	conditions	s (finan	cial or o	otherv	vise).			
(e)				has :	filed all	feder	al, state a	and loc	cal tax r	eturns
` '	ed to be f	iled, and has paid	or made a	adequat	te provi	ision f	or the pa	yment	of all fo	ederal,
_		axes, charges and		_	-		-			
(f)	To the	best of its' knowl	edge,					is i	n comp	oliance
` '		ceived no notice,	_						_	
		statutes, ordinan			-			_		
		nental or political		_						
incluc	ling, witho	out limitation, the	Rhode Is	land D	epartmo	ent of	Environ	mental	Manag	ement
and th	ne Enviror	nmental Protection	n Agency (or their	succes	sors.				
(g)	There is	s no action, suit	or proce	eding a	at law	or in	equity o	r by c	or befor	e any
gover	nmental i	nstrumentality or	other a	gency	now p	endin	g or, to	the k	knowled	ge of
				thre	eatened		against	or	aff	ecting
			, ·	which,	if adv	ersely	determi	ned, w	vould h	ave a
mater	ial adverse	e effect on the bu	siness, op	eration	s, prop	erties,	assets or	condi	tion, fin	ıancial
or oth	nerwise, of									
7.	Covenar	nts.					_ covena	nts and	d agrees	s that,
from	the date h	ereof and until ter	mination o	of the A	1greem	ent, _				
will:										
(a)	Do or c	ause to be done al	l things no	ecessary	y to pre	serve,	renew, a	nd kee	p in full	force
and e	ffect its' co	orporate existence	, rights, lic	enses,	permits	and f	Franchises	-		
(b)	Promptl	ly comply with all	applicable	e laws,	statutes	s, ordi	nances, r	ules an	d regula	ations,
order	s, injuncti	ions, writs or de	ecrees, wl	hether	now i	n eff	ect to he	ereafte	r enact	ed or
prom	ulgated by	any government,	or politica	ıl subdi	vision,	autho	rity, or ag	ency tl	nereof, o	or any
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fact or omits to state any material fact necessary to make statements contained therein or

court having jurisdiction	1.1	
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- (c) Pay and discharge or cause to be paid and discharged, all taxes, assessments and governmental charges or levies imposed upon it or upon its' respective income and profits or upon an of its' property, real, personal or mixed, or upon any part thereof, before the same shall become in default.
- (d) Give prompt written notice to the Department of any proceedings instituted against it by or in any federal or state court or before any commission or other regulatory body, whether federal, state or local, which seeks relief that might materially and adversely affect its' operations, financial condition, property or business.
- (e) Furnish to the Department, in form and detail satisfactory to the Department, such applications, financial statements, certificates, reports and such other information required by this Agreement, the Act or any rule or regulation promulgated thereunder or such information relating to the business and affairs of ______ as may be reasonably requested by the Department from time to time.
- (f) Permit agents or representatives of the Department to audit and/or inspect at reasonable hours its' books and records at such time or at such intervals as required by the Act or any rule or regulation promulgated thereunder and/or upon the request of the Department.
- (g) Pay to the Department such fees, assessments, including, without limitation, application fees, examination fees, license fees as required by the Act or any rule or regulation promulgated thereunder or as set by the Department in its' sole discretion.
- (h) Promptly advise the Department of any material adverse change in its' condition, financial or otherwise, or of the occurrence of any Event of Default as defined in Section 8 hereof or of the occurrence of any event which, upon notice or lapse of time or both, would constitute such an Event of Default.
- (i) Maintain or cause to be maintained such insurance, including public liability RI SI-17

insurance and fire and extended insurance coverage on all assets owned by it, all in such form and amounts as are consistent with industry practices and furnish to the Department such evidence of insurance as the Department may require.

(j)	No change in claim advisors can be accomplished unless prior approval granted by
the D	Department.
8.	Events of Default. The occurrence of any one or more of the following events
shall	constitute and Event of Default hereunder.
(a)	Failure or refusal by to comply with any
provi	sion of the Act or any rule or regulation promulgated thereunder; or
(b)	Failure or refusal by to pay when due any
-	pensation claim or any other amounts due and payable under the Act or under any rule
or reş	gulation promulgated thereunder; or
(c)	Breach of, or the proving false or misleading in any material respect, of any
_	sentation or warranty now or hereafter made to the Department, on behalf of or for
the b	penefit of or contained in this Agreement, in
	application for self-insurance, or in any financial
stater	ment, certificate, report or other documentation submitted to the Department; or
(d)	Failure or refusal by to pay, perform or
obser	rve any covenant, condition, obligation, or agreement contained in this Agreement, in
any o	of such Agreements or any other agreement between
and t	he Department, now existing or hereafter arising; or
(e)	The insolvency or inability of to pay its'
debts	s as they mature, or the appointment of a receiver, Trustee, custodian or other fiduciary,
	or for any of the property of, or an assignment for the benefit of creditors by,
	; or
(f)	The filing of a petition, complaint motion or other pleading seeking any relief under

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reorganization, composition, extension or any similar type of relief, or the filing of a petition, complaint, or motion under any chapter of the Federal Bankruptcy Code, as the same now exists or may hereafter be amended (the "Code"), by or against; or change for any reason in the ownership or (g) Any control of ____; or shall dissolve, liquidate, or consolidate or (h) merge with any other corporation or entity; or If _____ shall cease all or a substantial portion of (i) its' business operation; or If _____ shall sell, lease or exchange all or (j) substantially all of its' assets; or (k) If there is any adverse change in the financial or other condition of or any act or omission of _____ or any act or omission of any officer or director of _____ which leads the Department reasonably to believe that ______ is or may become unable to perform its' existing or future obligations under the Act, or to perform any or the covenants, agreements or conditions contained in this Agreement, such Agreements, or any other agreement to which ______ is a party, now existing or hereafter arising; or (1)If the Director of the Department determines in his sole discretion that the security for the payment or performances of the obligations of _____ under the Act is or may become impaired or inadequate. If _____ shall fail to 9. Revocation of Certificate. perform or observe any of the covenants, agreements or obligations on the part of _____ to be performed pursuant hereto, or if a default or an Event of Default shall occur under this Agreement or under any of such Agreements, then

receivership, insolvency, or debtor release law, or seeking any readjustment of indebtedness,

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in addition to any right or remedy the Department may have under this Agreement, such Agreements and the Act, the Department may revoke the Certificate in accordance with the procedures set forth in the Act.

10. <u>Claim Fund Account.</u> shall maintain a Claim
Fund Account (the "Account") in a federally insured institution approved by the
Department. Any change in the location or the account must be with prior approval of the
Department. The funds in the Account shall be used solely for the purpose of paying
weekly workers' compensation benefits, medical expenses, payments ordered by the
Worker's Compensation Court and any other benefits or payments provided for under the
Act. Payments for medical expenses on claims involving no weekly benefit payments (so-
called "medical only" claims) shall be paid only from this Account. The funds in the
Account shall remain distinct and separate from funds for reserves, administrative expenses
and other costs associated with the operation of the self-insurance program.
shall immediately provide to the Department the
name of the financial institution holding the Account. On the first business day of each
month beginning, and on the first business day of
each month thereafter, the Account shall have a minimum balance of
(\$
shall provide the Department, on or before the fifteenth (15th) day of each month beginning
, a report or all transactions on the Account for the prior
month hereby pledges and grants to the Department a
continuing security interest in and to the Account, and agrees to sign any and all documents
and instruments required by law to perfect said security interest. In addition,
hereby constitutes and appoints the individual serving
from time to time as the Director of the Department its' attorney in fact for the purpose of
signing any and all documents and financing statements and the taking of any and all action
that the Director may deem necessary and appropriate to perfect such security interest. The
foregoing power shall be coupled with an interest and is hereby deem irrevocable.
11. <u>Claims Account Information</u> .
Adjusting Firm:
Bank of Deposit for Claims:
Claims Account Number

12. <u>Claims Administration</u> . The Department shall have the right to approve any claims
monitoring, claims administration or claims adjusting plan proposed by
to administer its' Rhode Island claims. No contract or
agreement between and any claims administration
company shall be valid and enforceable unless approved in writing by the Department; fax
method acceptable.
13. <u>Execss Insurance</u> . shall maintain a policy of
excess insurance with a maximum retention ofdollars
(\$) and or an aggregate limit of dollars
(\$) for Workers' Compensation; or statutory coverage only with an issuer
qualified to transact business in the State of Rhode Island and/or approved by the
Department in its' sole discretion. The policy shall require the insurer to notify the
Department at least ten (10) days in advance of the cancellation of said excess insurance
policy and any changes to the policy immediately upon receipt of notice thereof. Said excess
insurance policy shall provide coverage for all Rhode Island employees of
A captive insurance company may be approved by
the Director, but such captive cannot write competitive business or any other business that
is not connected with the controlling company.
14. <u>General Liability Insurance.</u> shall provide to
the Department, upon the execution of this Agreement, and thereafter at all times while the
Certificate is in effect, copies of each liability policy or policies issued to
covering claims arising on or after
Each such liability policy covers claims arising
during the period when the Certificate is in effect and shall be specifically written to cover
Rhode Island locations of
15 Einen del Cartemante
15. <u>Financial Statements</u> . shall submit to the
Department such financial statements, certified by an accounting firm acceptable to the
Department in its' sole discretion, at such times and in such form as the Department may
require from time to time, but, as long as an Event of Default shall not have taken place, in
no event shall the Department require the submission of said statements more than on a
quarterly basis unless required by law.

16. <u>Litigation</u> .		shall	promptly	notify	the
Department of all l	lawsuits and administrative proceed	lings filed agai	nst it in any	state an	d of
any change in the	status of any such proceedings wh	nich may adve	rsely affect	its' finan	ncial
condition.					
17. <u>Agreement</u>	Authorized.			repres	ents
and warrants to the	e Department that this Agreement	constitutes the	e legal, valid	and bin	ding
agreement of	 ,	duly authorize	d by all req	uisite ac	tion,
	ainst				
18. <u>Notices</u> .	All notices, requests, demands	or other comn	nunications	provideo	d for
hereunder shall be	in writing (including telegraphic of	communication	n) and mail	ed first o	class
mail, postage prep	aid, or telegraphed or delivered to	o the applical	ole party at	the add	lress
indicated below:					
If to Self-Insured:					
Attention:					
If to the Departme	nt:				
	Rhode Island Department of L	abor & Trainii	ng		
	1511 Pontiac Avenue, PO Box	20190			
	Cranston, RI 02920-0942				
	Attn: Self-Insurance Unit				

or, as to either party, at such other address as shall be designated by such party in a written notice to the other party complying as to delivery with the terms of this Section. All such notices and other communications shall, when mailed or telegraphed, respectively, be effective when deposited in the mails or delivered to the telegraph company, respectively, addressed as aforesaid.

19. <u>Governing Law; Binding Agreement</u>. This Agreement shall be governed, construed and interpreted in accordance with the laws of the State of Rhode Island (without reference to its' conflicts of laws principles). This Agreement shall be binding upon and shall inure to RI SI-17

the	benefit	of	the	parties	hereto	and	their	successors	and	permitted	as	ssigns.
Not	withstand	ling t	he fo	regoing,					_ may	not assign i	its'	rights
or d	elegate ar	ıy du	ties h	ereunder	without	the pr	rior wri	tten consent	of the	e Departmer	nt.	
IN V	WITNES	S WI	HERI	EOF, the	parties l	nereto	have c	aused this Ag	greeme	ent to be ex	ecu	ited as
of th	ne date fir	st w	ritten	above.								
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DLT is an equal opportunity employer/program - auxiliary aids and services available upon request. TTY via RI Relay: 711 RI SI-17